Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 1 of 73

| Fill in this information to identify your case: | |
|---|---|
| United States Bankruptcy Court for the: Northern District of: Illinois | |
| (State) Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Identify Yourself | | |
|----|---|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Darryl | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's license or passport | Stallings Last name | Last name |
| | B.t. and a state of | Last Harrie | Last Harrie |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | Darryl | |
| | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | Stallings | Lastronia |
| | | Last name | Last name |
| | | First name | First name |
| | | 7. C. | AC 1 11 |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX3123 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 2 of 73

| D | ebtor 1 Darryl First Name | Stallings Middle Name Last Name | Case number (if known) |
|----|--|---|--|
| | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | 1001.0 | If Debtor 2 lives at a different address: |
| | | Number Street G | Number Street |
| | | | |
| | | Chicago Illinois 60653 City State Zip Code | City State Zip Code |
| | | · | |
| | | Cook County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | | |
| | | Number Street | Number Street |
| | | City State Zip Code | City State Zip Code |
| | | | , State Lip 6000 |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 3 of 73

| Debtor 1 Darryl | | Stallings | | Case number (if knd | own) | |
|---|---|--|--|---|---|---|
| First Name | Middle Name | Last Name | | | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy (| Case | | | | |
| The chapter of the Bankruptcy Code you are choosing to file under | | description of each, see /10)). Also, go to the top of | | | | ndividuals Filing for |
| 8. How you will pay the fee | more details about cashier's check, of may pay with a cree Individuals to Pay I request that my judge may, but is the official poverty you choose this o | t how you may pay. Typ r money order If your a edit card or check with a fee in installments. If y r Your Filing Fee in Insta fee be waived (You man not required to, waive you y line that applies to you | ically, if you attorney is a pre-print ou choose ou choose ou choose ou request pur fee, an ur family si | ou are paying the submitting you ed address. this option, sig official Form 103 this option only d may do so only ze and you are u | e fee yourself, r payment on y and attach to A). If you are filingly if your incorunable to pay to | ce in your local court for you may pay with cash, your behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If illing Fee Waived (Official |
| 9. Have you filed for bankruptcy within the last 8 years? | No. ✓ Yes. District District District | them District of Illinois | When When When | 1/30/2017 MM / DD / YYYY MM / DD / YYYY | Case number _ Case number _ Case number _ | 17-bk-02590 |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | | When When | MM / DD / YYYY | Relationship to Case number, i Relationship to Case number, i | you |
| 11. Do you rent your residence? | ✓ No. Got | lord obtained an eviction journal of the second of the sec | - | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 4 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 5 of 73

Debtor 1 Darryl Stallings Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 6 of 73

| Debtor 1 Darryl | N. C. I. II. N. | Stallings | Case number (if know | <i>(n)</i> | | |
|---|--|---|---|---|--|--|
| Part 6: Answer These Que | Middle Name estions for Reporting | Last Name Purposes | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts "incurred by an No. Go to li Yes. Go to 16b. Are your debts money for a bu No. Go to li Yes. Go to | s primarily consumer det individual primarily for a ine 16b. line 17. s primarily business debt siness or investment or th ine 16c. line 17. | personal, family, or house s? <i>Business debts</i> are deb | ots that you incurred to obtain be business or investment. | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing und expenses are | under Chapter 7. Go to line der Chapter 7. Do you estim e paid that funds will be avai | | operty is excluded and administrative ed creditors? | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 5,00 | 0-5,000 1-10,000 01-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,00 \$100,001-\$500,00 \$500,001-\$1 mil | 00 | 00,001-\$10 million 000,001-\$50 million 000,001-\$100 million 0,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,00 \$100,001-\$500,0 \$500,001-\$1 mil | 00 | 00,001-\$10 million 000,001-\$50 million 000,001-\$100 million 0,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| Part 7: Sign Below | | | | | | |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 1 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| | /s/ Darryl Stalling Signature of Debto | | Signature of | Debtor 2 | | |
| | Executed on _ | 8/7/2017 MM / DD / YYYY | Executed of | on | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 7 of 73

| Debtor 1 Darryl | | Stallings | Case number (if | fknown) |
|--|----------------------------|--------------------------|--------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12, c | or 13 of title 11, Unite | nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § 34 | 2(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the inf | ormation in the sched | dules filed with the petition is incorrect. |
| attorney, you do not | · · | , , | | · |
| need to file this page. | /s/ Chris Prvor | | Date | 8/7/2017 |
| | Signature of Attorney for | or Debtor | | MM / DD / YYYY |
| | · · | | | |
| | | | | |
| | Chris Pryor | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Ave | nue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | | Email address | cpryor@semradlaw.com |
| | | | | |
| | | | Illinois | S |
| | Bar number | | State | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 8 of 73

| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Darryl | Stallings | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| Case number (If known) | | | (State) | | | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filii | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | · |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$1,206.00 —————————————————————————————————— |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$1,206.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | • |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$158,148.00 |
| Your total liabilities | \$158,148.00 |
| Part 3: Summarize Your Income and Expenses | |
| | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,936.74 |
| | |
| 5. Schedule J: Your Expenses (Official Form 106J) | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 9 of 73

| Deb | otor 1 Darryl | | Stallings | Case number (if known) | | | | | | |
|-------------|---------------------------------------|--|--|---|--------------------|--|--|--|--|--|
| | First Name | Middle Name | Last Name | | | | | | | |
| Part | 4: Answer These Que | stions for Administrat | ive and Statistical Record | <u> </u> | | | | | | |
| 6. A | Are you filing for bankruptcy | under Chapters 7, 11, or | 13? | | | | | | | |
| - | No. You have nothing to | report on this part of the fo | rm. Check this box and submit t | this form to the court with your other so | chedules. | | | | | |
| i | Yes. | | | | | | | | | |
| - " | <u> </u> | | | | | | | | | |
| 7. V | What kind of debt do you ha | | | | | | | | | |
| | | | mer debts are those incurred by ill out lines 8-10 for statistical pu | an individual primarily for a personal, urposes. 28 U.S.C. § 159. | | | | | | |
| | Your debts are not prim | arily consumer debts. Yo | u have nothing to report on this | part of the form. Check this box and s | ubmit | | | | | |
| | this form to the court with | | | | | | | | | |
| Ω | From the Statement of You | r Current Monthly Incom | e: Copy your total current month | aly income from Official | \$1,690.97 | | | | | |
| | Form 122A-1 Line 11; OR , Form | | | ny income nom omolai | \$1,690.9 <i>1</i> | | | | | |
| | | | | | | | | | | |
| 9. | Copy the following special | copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | | | | | | | | |
| | From Part 4 on Schedule I | E/F, copy the following: | | Total claim | | | | | | |
| | 9a. Domestic support obliga | tions (Copy line 6a.) | | \$0.00 | | | | | | |
| | | , , , | | | | | | | | |
| | 9b. Taxes and certain other | debts you owe the governr | nent. (Copy line 6b.) | 40.00 | | | | | | |
| | 9c. Claims for death or person | onal injury while you were i | ntoxicated. (Copy line 6c.) | \$0.00 | | | | | | |
| | 9d. Student loans. (Copy lin | e 6f.) | | \$137,862.00 | | | | | | |
| | 9e Obligations arising out o | f a senaration agreement o | r divorce that you did not report | \$0.00 | | | | | | |
| | priority claims. (Copy line 6g.) | | i aivoico mai you did not report | | | | | | | |
| | 9f. Debts to pension or profi | t-charing plane, and other | eimilar dobte (Copy line 6h) | \$0.00 | | | | | | |
| | or pents to pension of profi | t-snamy plans, and other | annua debia. (Oopy inte on.) | | | | | | | |

\$137,862.00

9g. Total. Add lines 9a through 9f.

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 10 of 73

| Fill in this | inform | nation to identify your c | ase: | | | | | |
|--|---------------------------|---|---|----------------------|--|--|---|---|
| Dalatau 1 | | Damed | | | Challing | | | |
| Debtor 1 | | Darryl First Name | Middle N | ame | Stallings Last Name | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if fi | ling) | First Name | Middle N | ame | Last Name | | | |
| United Sta | ates Ba | nkruptcy Court for the: | Northern | | District of Illinois (State) | | | |
| Case num (If known) | ber | | | | (=====) | | | |
| Officia | al Fo | orm 106A/B | | | | | | Check if this is an amended filing |
| Sche | dule | A/B: Prope | ertv | | | | | 12/1 |
| category v responsibl write your | where le for s name | you think it fits best. I | Be as complete a mation. If more s known). Answer e | nd a pace very | ccurate as possible. I is needed, attach a s question. | f two married people separate sheet to this | an one category, list the are filing together, both a form. On the top of any a | re equally |
| | | or have any legal or ed | • | | | | | |
| | No. G | or nave any legal or ed to to Part 2 Where is the property? | quitable interest i | | _ | | | |
| 1.1 | Street | address, if available, or | other description | Wh | at is the property? Che Single-family home Duplex or multi-unit be | | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. |
| | | | | | Condominium or coop | perative | Current value of the entire property? | Current value of the portion you own? |
| | | | | | Manufactured or mobi | ie nome | | |
| | Numb | per Street | | Н | Land Investment property | | Describe the nature o | f your ownership |
| | | | | | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | | Other | | Object Militaria | |
| | | | | Wh | o has an interest in t | he property? Check | (see instructions) | mmunity property |
| | | | | | Debtor 1 only | | Ш | |
| | | | | П | Debtor 2 only | | | |
| | | | | H | Debtor 1 and Debtor 2 | only | | |
| | | | | H | At least one of the deb | tors and another | | |
| | | | | | ner information you w perty identification n | ish to add about this umber: | item, such as local | |
| If you | own o | r have more than one, li | ist here: | | | | | |
| | | | | Wh | at is the property? Ch | neck all that apply. | Do not deduct secured | claims or exemptions. Put |
| 1.2 | Street | address, if available, or | other description | | Single-family home | | | red claims on Schedule D: ims Secured by Property. |
| | Olicei | address, ii available, or | other description | | Duplex or multi-unit be | uilding | | , , |
| | | | | | Condominium or coop | perative | Current value of the entire property? | Current value of the portion you own? |
| | | | | | Manufactured or mobi | le home | | |
| | Numb | per Street | | | Land | | Describe the nature o | f.vo.v. ovenovobin |
| | | | | | Investment property | | interest (such as fee s | imple, tenancy by |
| | City | State | Zip Code | Щ | Timeshare Other | | the entireties, or a life | e estate), if known. |
| | | | · | Wh one | o has an interest in tl | he property? Check | Check if this is co (see instructions) | mmunity property |
| | | | | | Debtor 1 only | | | |
| | | | | | Debtor 2 only | | | |
| | | | | H | Debtor 1 and Debtor 2 | only | | |
| | | | | Ħ | At least one of the deb | - | | |
| | | | | | ner information you w perty identification n | ish to add about this umber: | item, such as local | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 11 of 73

| Debtor 1 | Darryl | | Stallings Case numb | oer (if known) | |
|-----------|--|------------------------------------|--|---|--|
| | First Name | Middle Name | Last Name | | |
| 1.3Stre | et address, if available, or ot | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building | the amount of any secu | claims or exemptions. Put tred claims on <i>Schedule D:</i> aims <i>Secured by Property.</i> |
| | | | Condominium or cooperative Manufactured or mobile home | Current value of the entire property? | Current value of the portion you own? |
| Nur | nber Street State | Zip Code | Land Investment property Timeshare Other | Describe the nature of interest (such as fee sthe entireties, or a life | simple, tenancy by |
| you ha | the dollar value of the pove attached for Part 1. Wr | tion you own for ite that number h | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this itemproperty identification number: all of your entries from Part 1, including any entri | (see instructions) | ommunity property |
| you own t | hat someone else drives. If y uns, trucks, tractors, sport ut | ou lease a vehicle, | t in any vehicles, whether they are registered or ralso report it on Schedule G: Executory Contracts and cycles | | |
| 3.1 | Make Model: Year: | | Who has an interest in the property? Check one. Debtor 1 only | the amount of any sec | claims or exemptions. Put ured claims on <i>Schedule D:</i> laims <i>Secured by Property</i> . |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| | | | Check if this is community property (see instructions) | | |
| 3.2 | Make Model: Year: | | Who has an interest in the property? Check one. Debtor 1 only | the amount of any sec | I claims or exemptions. Put ured claims on Schedule D: laims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| | | | Check if this is community property (see instructions) | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 12 of 73

| | Darryl First Name | Middle Name | Stallings Last Name | Case numbe | | |
|------|--|---------------------------------------|--|--|---|---|
| 3.3 | Make Model: Year: | | Who has an interest in the one. Debtor 1 only | property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | · · · · · · · · · · · · · · · · · · · |
| | Approximate mileage: | | Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | | Debtor 1 and Debtor 2 o | • | —————— | portion you own: |
| | | | At least one of the debto | rs and another | | |
| | | | Check if this is commu instructions) | nity property (see | | |
| 3.4 | Make | | Who has an interest in the | property? Check | Do not deduct secured | • |
| | Model: Year: | | one. | | the amount of any secu | ired claims on <i>Schedule</i> aims Secured by Propert |
| | Approximate mileage: | | Debtor 1 only | | Oreanors who have on | umo occured by moperi |
| | | · · · · · · · · · · · · · · · · · · · | Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | | Debtor 1 and Debtor 2 o | • | ————— | ————— |
| | | | At least one of the debto | rs and another | | |
| | | | Check if this is commu instructions) | nity property (see | | |
| | | • | er recreational vehicles, othe t, fishing vessels, snowmobiles, | • | | |
| Exa | nples: Boats, trailers, motors No Yes | • | | motorcycle accessor | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | t, fishing vessels, snowmobiles, Who has an interest in the | motorcycle accessor | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: | • | t, fishing vessels, snowmobiles, Who has an interest in the one. | motorcycle accessor | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Propert Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | who has an interest in the one. Debtor 1 only | motorcycle accessor property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only | motorcycle accessor property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Propert Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o | property? Check nly rs and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Propert Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is commu instructions) Who has an interest in the | property? Check nly rs and another nity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. F |
| 4.1 | Make Model: Other information: Make Model: Make Model: Make Model: Model: Model: Model: Model: Model: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is commu instructions) Who has an interest in the one. | property? Check nly rs and another nity property (see | Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property? Do not deduct secured the amount of any secu | claims on Schedule control of the portion you own? claims or exemptions. Fured claims on Schedule |
| 4.1 | Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is commu instructions) who has an interest in the one. Debtor 1 only | property? Check nly rs and another nity property (see | Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is commu instructions) Who has an interest in the one. Debtor 1 only Debtor 2 only | property? Check nly rs and another nity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule hims Secured by Propert Current value of the |
| 4.1 | Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is commu instructions) Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 o | property? Check nly rs and another nity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule hims Secured by Propert |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debto Check if this is commu instructions) Who has an interest in the one. Debtor 1 only Debtor 2 only | property? Check nly rs and another nity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule hims Secured by Propert Current value of the |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 13 of 73

| De | ebtor 1 | Darryl | Stallings Case number (if known) | |
|------------|------------|---------------------------------------|--|--|
| | | First Name | Middle Name Last Name | |
| Pa | rt 3: | Describe Y | our Personal and Household Items | |
| D | o you | ı own or hav | e any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | _ | and furnishings liances, fumiture, linens, china, kitchenware | |
| <u> </u> | | Describe | Miscellaneous goods and furniture | \$310.00 |
| | | e tronics ples: Televisions | s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music | |
| ✓ | Yes. | Describe | Used electronics | \$380.00 |
| | | | ue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; in, or baseball card collections; other collections, memorabilia, collectibles | |
| ✓ | No Yes. | Describe | | |
| _ | I | | | |
| | - | oles: Sports, ph | rts and hobbies at the control of th | |
| ✓ | No | | | |
| | Yes. | Describe | | |
| | | earms oles: Pistols, rifl | es, shotguns, ammunition, and related equipment | |
| ✓ | No | | | |
| | Yes. | Describe | | |
| | | | clothes, furs, leather coats, designer wear, shoes, accessories | _ |
| Щ | No | | | |
| ⊻ | Yes. | Describe | Miscellaneous clothing | \$448.00 |
| | | - | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er | |
| ✓ | No | | | |
| Ш | Yes. | Describe | | |
| | Exam | n-farm animal oles: Dogs, cats | | |
| ✓ | No | | | |
| | Yes. | Describe | | |
| | | y other person | al and household items you did not already list, including any health aids you did not list | |
| lacksquare | No | D | | |
| П | Yes. | Describe | | |
| | | | llue of all of your entries from Part 3, including any entries for pages you have attached number here | \$1138.00 |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 14 of 73

| Debt | or 1 Darryl First Name | Middle Name | Stallings Last Name | Case number (if known) | |
|--------------|---|--|----------------------------|---|--|
| Part 4 | | | Zaot Mario | | |
| Doy | you own or have any | y legal or equitable interest | in any of the follow | ing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. (| xamples: Money you ha | ve in your wallet, in your home, in | · | on hand when you file your petition | \$50.00 |
| 17. | Deposits of money Examples: Checking, sa | | certificates of deposit; s | Cash:shares in credit unions, brokerage houses, stitution, list each. | |
| | No ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: | Go Bank | | \$8.00 |
| | | 17.2. Checking account: | BMO Harris | | \$10.00 |
| | | 17.3. Savings account: | | | |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | - | | - |
| 18. | | or publicly traded stocks investment accounts with brokera Institution or issuer name: | age firms, money marke | t accounts | |
| | | | | | |
| 19. | an LLC, partnership, a | | ed and unincorporate | d businesses, including an interest in | |
| | Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 15 of 73

| Debt | tor 1 Darryl | Add to At | Stallings | Case number (if known) | | | | | |
|------|---|-------------------------------------|---------------------------------|--|----------|--|--|--|--|
| | First Name | Middle Name | Last Name | | | | | | |
| 20. | | orate bonds and other negotia | | | | | | | |
| | Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. | | | | | | | | |
| | ✓ No | | g | | | | | | |
| | Yes. Give specific | | | | | | | | |
| | information about | Issuer name: | | | | | | | |
| | them | | | | | | | | |
| | | | | | <u> </u> | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 21. | Retirement or pension | | V 11-261 2 | Challes and the second | | | | | |
| | | RA, ERISA, Keogn, 401(k), 403(b |), thrift savings accounts, | or other pension or profit-sharing plans | | | | | |
| | ✓ No | Type of account: | Institution name: | | | | | | |
| | Yes. List each account | 401(k) or similar plan: | | | | | | | |
| | separately. | | | | | | | | |
| | | Pension plan: | | | - | | | | |
| | | IRA: | | | _ | | | | |
| | | Retirement account: | | | | | | | |
| | | Keogh: | | | | | | | |
| | | Additional account: | | | | | | | |
| | | Additional account: | - | | | | | | |
| 22. | Security deposits and | prepayments | | | - | | | | |
| | | deposits you have made so that | | | | | | | |
| | companies, or others | with landlords, prepaid rent, publi | ic utilities (electric, gas, wa | ater), telecommunications | | | | | |
| | ✓ No | | Institution name: | | | | | | |
| | Yes | Electric: | | | | | | | |
| | _ | Gas: | | | | | | | |
| | | Heating oil: | - | | | | | | |
| | | Security deposit on rental unit: | | | | | | | |
| | | Prepaid rent: | | | - | | | | |
| | | Telephone: | | | | | | | |
| | | Water: | | | | | | | |
| | | Rented furniture: | | | _ | | | | |
| | | Other: | | | _ | | | | |
| 23 | Annuities (A contract fo | or a periodic payment of money to | vou either for life or for | a number of years) | - | | | | |
| 20. | No | or a periodic payment of money to | you, entre for the or for | a number of years) | | | | | |
| | Ë | Issuer name and description: | | | | | | | |
| | Yes | | | | | | | | |
| | | | | | <u> </u> | | | | |
| | | | | | - | | | | |
| | | | | | | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 16 of 73

| Debt | or 1 Darryl | | umber (if known) | |
|------|--|--|--|--|
| 0.4 | First Name | Middle Name Last Name | iad atata tuitian nuannam | |
| 24. | | education IRA, in an account in a qualified ABLE program, or under a qualif 30(b)(1), 529A(b), and 529(b)(1). | ied state tuition program. | • |
| | ✓ No Yes | Institution name and description. Separately file the records of any interests.11 U.S. | C. § 521(c): | |
| | - | | | |
| | - | | | |
| 25. | Trusts, equitable for | ble or future interests in property (other than anything listed in line 1), and ri r your benefit | ghts or powers | |
| | No Yes. Descril | ihe | | 1 |
| | L Tes. Descri | De | | |
| 26. | | rights, trademarks, trade secrets, and other intellectual property net domain names, websites, proceeds from royalties and licensing agreements | | |
| | √ No | | | |
| | Yes. Descril | ibe | | |
| 27. | Licenses, franc | chises, and other general intangibles | | |
| | | ding permits, exclusive licenses, cooperative association holdings, liquor licenses, pr | rofessional licenses | |
| | ✓ No Yes. Descril | iha | | 1 |
| | L Tes. Descri | D6 | | |
| | | | | |
| N. 4 | | | | 0 |
| Mor | ney or propert | y owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or propert | | | portion you own? |
| | | | | portion you own? Do not deduct secured |
| | Tax refunds owe | ed to you Decific information | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owe No Yes. Give sp about you alr | ed to you | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds own No Yes. Give sp about you alr and th | pecific information them, including whether ready filed the returns the tax years | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owe No Yes. Give sp about you alr and th Family support Examples: Past of | pecific information them, including whether ready filed the returns the tax years | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds own No Yes. Give sp about you alr and th Family support Examples: Past of | pecific information them, including whether ready filed the returns the tax years | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds own No Yes. Give sp about you alr and th Family support Examples: Past of | pecific information them, including whether ready filed the returns te tax years | State: Local: sttlement, property settlemer | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds own No Yes. Give sp about you alr and th Family support Examples: Past of | pecific information them, including whether ready filed the returns the tax years | State: Local: ettlement, property settlemer Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds own No Yes. Give sp about you alr and th Family support Examples: Past of | pecific information them, including whether ready filed the returns the tax years | State: Local: ttlement, property settlemer Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 |
| 29. | Tax refunds own No Yes. Give sp about you alr and th Family support Examples: Past of No Yes. Give sp | pecific information them, including whether ready filed the returns le tax years due or lump sum alimony, spousal support, child support, maintenance, divorce se pecific information | State: Local: sttlement, property settlemer Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds own No Yes. Give spabout you alrand th Family support Examples: Past of Yes. Give spatial Yes. Give spatia | pecific information them, including whether ready filed the returns the tax years | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds own No Yes. Give spabout you alrand th Family support Examples: Past of Yes. Give spatial Yes. Give spatia | pecific information them, including whether ready filed the returns te tax years | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds own No Yes. Give spabout you alrand the samples: Past of Yes. Give sport Family support Examples: Past of Yes. Give sport Other amounts Examples: Unpair Social | pecific information them, including whether ready filed the returns le tax years | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 17 of 73

| Deb | tor 1 Darryl | Stallings | Case number (if known) | |
|------|--|---|--|--|
| | First Name | Middle Name Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life ins | urance; health savings account (HSA); credit, ho | omeowner's, or renter's insurance | |
| | Yes. Name the insurance compar of each policy and list its value | | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due If you are the beneficiary of a living tru property because someone has died. No | e you from someone who has died ust, expect proceeds from a life insurance policy | , or are currently entitled to receive | |
| | Yes. Describe | | | |
| 33. | | ner or not you have filed a lawsuit or made a sputes, insurance claims, or rights to sue | a demand for payment | |
| | Yes. Describe | | | |
| 34. | Other contingent and unliquidated to set off claims | I claims of every nature, including counterc | laims of the debtor and rights | |
| | Ves. Describe | | | |
| 35. | Any financial assets you did not al | ready list | | |
| | ✓ No Yes. Describe | | | |
| 36. | | entries from Part 4, including any entries for | | \$68.00 |
| Part | 5: Describe Any Business-Re | lated Property You Own or Have an In | terest In. List any real estate in Part | t 1 . |
| 37. | Do you own or have any legal or ed | quitable interest in any business-related pro | perty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | p C | Current value of the cortion you own? On not deduct secured claims or exemptions |
| 38. | Accounts receivable or commissio | ns you already earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and Examples: Business-related computer | supplies rs, software, modems, printers, copiers, fax ma | chines, rugs, telephones, desks, chairs, elect | ronic devices |
| | ✓ No ☐ Yes. Describe | | | |
| | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 18 of 73

| Debt | tor 1 Darryl | Stallings | Case number (if known) | |
|----------|--|---|-------------------------------|------------------------------|
| 10 | First Name Middle Nam | | | |
| 40. | Machinery, fixtures, equipment, supplies yo | u use in business, and tools of your t | rade | |
| | No | | | |
| | Yes. Describe | | | |
| | | | | |
| 41. | Inventory | | | |
| | I ✓ No | | | |
| | Yes. Describe | | | |
| | – | | | |
| 40 | Internation and an article and article article article and article art | | | |
| 42. | Interests in partnerships or joint ventures | | | |
| | ✓ No | Name of entity: | % of ownership: | |
| | Yes. Give specific information about | • | · | |
| | them | | | |
| | | | | |
| | | | | |
| 43. | Customer lists, mailing lists, or other compil | ations | | |
| | ✓ No | | | |
| | Yes. Do your lists include personally identif | iable information (as defined in 11 U.S.C | C. § 101(41A))? | |
| | — No | | | |
| | Yes. Describe | | | |
| | Test Becombe | | | |
| 44. | Any business-related property you did not a | lready list | | |
| | ✓ No | | | |
| | Yes. Give specific | | | <u> </u> |
| | information | | | |
| | | | | |
| | | | | |
| | | | | <u> </u> |
| | | | | - |
| | | | | |
| | | | | |
| | dd the dollar value of all of your entries from art 5. Write that number here | | | |
| <u> </u> | | | | |
| Part | Describe Any Farm- and Commerce If you own or have an interest in farmland, list in the second secon | | u Own or Have an Interest In. | |
| 10 | | | | |
| 46. | Do you own or have any legal or equitable i | nterest in any farm- or commercial fi | isning-related property? | Current value of the |
| | No. Go to Part 7. | | | portion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims |
| 47. | Farm animals | | | or exemptions |
| | Examples: Livestock, poultry, farm-raised fish | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 19 of 73

| Deb | otor 1 Darryl First Name | Middle Name | Stallings Last Name | Case number (if known) | |
|--------------|-----------------------------|-------------------------------------|---------------------------|------------------------------|-------------|
| 40 | | | Last Name | | |
| 48. | Crops-either growing of | or narvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 49 | Farm and fishing equin | ment, implements, machinery, fix | tures and tools of trade | <u>.</u> | |
| 10. | | mont, impromente, maeillery, nx | turos, and toolo or trade | • | |
| | No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 50. | Farm and fishing suppl | ies, chemicals, and feed | | | |
| | . ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 51. | Any farm- and commer | cial fishing-related property you o | lid not already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| | | | | Г | |
| | | of your entries from Part 6, inclu | | | |
| lor P | art 6. Write that number | here | | | |
| | | | | | |
| | | | | | |
| Part | 7 Describe All Pro | oerty You Own or Have an Int | erest in That You Dic | l Not List Above | |
| | | erty of any kind you did not alread | | | |
| | | , country club membership | • | | |
| | ✓ No | | | | l |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| 54. A | add the dollar value of all | of your entries from Part 7. Write | that number here | | > |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | o Liet the Tetale of | Fools Doub of this Forms | | | |
| Part | Eist the Totals of | Each Part of this Form | | | i |
| 55. | Part 1: Total real estate | line 2 | | | |
| | | | | | |
| 56. | part 2 total vehicles, line | e 5 | - | <u>—</u> | |
| 57. I | Part 3: Total personal an | d household items, line 15 | \$1138.00 | | |
| 58. I | Part 4: Total financial as | sets, line 36 | \$68.00 | | |
| 59. | Part 5: Total business-re | lated property, line 45 | 400.00 | _ | |
| | | | | _ | |
| | | shing-related property, line 52 | | <u> </u> | |
| 61. | Part 7: Total other prope | erty not listed, line 54 | | <u></u> | |
| 62. | Total personal property. | Add lines 56 through 61 | ····· \$1206.00 | | + \$1206.00 |
| | | | <u> </u> | Copy personal property total | . 41200.00 |
| | | | | | \$1206.00 |
| 63.1 | Total of all property on S | chedule A/B. Add line 55 + line 62 | | | Ψ1200.00 |
| 1 | | | | | 1 |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:20 Desc Main

| | Case 17-2330 | | | Page 20 of 73 | 1/11 11.23.29 | Desc Main |
|-------------------------------|---|---|---|--|---|--|
| Fill in this infor | mation to identify your c | ase: | | | | |
| Debtor 1 | Darryl | | Stallings | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States B | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | . , | | | |
| Official | Form 106C | | | | | Check if this is an amended filing |
| Schedul | e C: The Prop | erty You Claim | as Exem | pt | | 04/16 |
| information. Uas exempt. If r | Jsing the property yo more space is needed | | <i>/B: Property</i> (Offi his page as many | icial Form 106A/B) | as your source, lis | for supplying correct at the property that you claim as necessary. On the top of any |
| state a specifithe amount o | fic dollar amount as of any applicable sta | exempt. Alternatively, tutory limit. Some exer | you may claim mptions—such | the full fair marke as those for healtl | et value of the pro h aids, rights to re | One way of doing so is to perty being exempted up to being exempted up to be ceive certain benefits, and |

tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | t 1: Identify the Property You Claim | n as Exempt | | | | |
|-----|---|---|---|------------------------------------|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | |
| | Brief description: Checking account, Go Bank Line from Schedule A/B: 17 | \$8.00 | \$8.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | |
| | Brief description: Miscellaneous goods and furniture Line from Schedule A/B: 06 | \$310.00 | \$310.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | |
| 3. | (Subject to adjustment on 4/01/19 and eve | ry 3 years after that for o | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 21 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$448.00 description: **✓** \$448.00 Miscellaneous clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$50.00 description: **✓** \$50.00 Cash on hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 735 ILCS 5/12-1001(b) Brief \$380.00 description: **✓** \$380.00 **Used electronics** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief \$10.00 description: \$10.00 Checking account, BMO 100% of fair market value, up to any Harris applicable statutory limit

Line from Schedule A/B:

17

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 22 of 73

| Fill in this info | rmation to identify your o | case: | | | | |
|------------------------|--------------------------------|--|--|---|-----------------------------------|------------------------------------|
| Debtor 1 | Darryl | | Stallings | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | '- | (State) | | | |
| Case number (If known) | | | | | | |
| Official | Form 106D | | | _ | | Check if this is an amended filing |
| Schedi | ule D: Credi | tors Who Ha | ve Claims Secur | ed by Prop | erty | 12/15 |
| more space is | | | e are filing together, both are eq nber the entries, and attach it to | | | |
| 1. Do any | creditors have claims | secured by your propert | ty? | | | |
| ✓ No. | Check this box and sub | mit this form to the court v | with your other schedules. You ha | ve nothing else to repo | ort on this form. | |
| Yes. | . Fill in all of the informati | on below. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| | | | red claim, list the creditor separately | Column A | Column B | Column C |
| | | editor has a particular claim, alphabetical order according | list the other creditors in Part 2. As g to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports | Unsecured portion |

this claim

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 23 of 73

| Fill | in this infor | mation to identify your c | ase: | | | | | |
|-----------------------|---|--|--|---|---|---|---|---|
| Deb | otor 1 | Darryl | | Stallings | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | otor 2 ouse, if filing) | E'm I Nom a | APALIL No. | Last Name | | | | |
| (Spc | ouse, ir iiiirig) | First Name | Middle Name | Last Name | | | | |
| Uni | ited States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| Cas | se number | | | (State) | | | | |
| | nown) | | | | | | | |
| Of | ficial F | orm 106E/F | | | | Ch | eck if this is ar | n amended filing |
| | | | . al:4 aa \A/la a | Harra Haar | | | | |
| 50 | cneai | ule E/F: Gre | eaitors wno | Have Unse | ecured Claims | | | 12/15 |
| othe Forn clair | er party to n 106A/B) ms that are entries in t | any executory contract: and on Schedule G: Exe e listed in Schedule D: C | s or unexpired leases that ecutory Contracts and Une Creditors Who Hold Claims | could result in a clair expired Leases (Officia Secured by Property. | ims and Part 2 for creditors wit n. Also list executory contracts I Form 106G). Do not include If more space is needed, copy e top of any additional pages, v | on <i>Sched</i> ny credito the Part y | <i>ule A/B: Prop</i> rs with partia ou need, fill i | perty (Official ally secured it out, number |
| Par | rt 1: List | All of Your PRIORIT | Y Unsecured Claims | | | | | |
| 1. | Do any c | reditors have priority ur | nsecured claims against y | ou? | | | | |
| | ✓ No. | Go to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, ide As much Continuat | ntify what type of claim it as possible, list the claims tion Page of Part 1. If mor | is. If a claim has both priori | ty and nonpriority amoust ding to the creditor's nar particular claim, list the c | | both priorit | y and nonprio | rity amounts. |
| | | | | | | Total | Deignitus | Mannulaultu |

claim

amount

amount

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 24 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 American InfoSource LP (agent for TMobile) \$1,524.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 248848 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 73124 Oklahoma City Oklahoma City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: V Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Collecting For -Unsecured debt Is the claim subject to offset? Yes 4.2 American InfoSource LP (agent for TMobile) \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 248848 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Oklahoma City 73124 Oklahoma City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collecting For - Unsecured debt Is the claim subject to offset? **V** No Yes 4.3 City of Chicago - Dep't of Revenue \$3,252.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 88292 n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60608 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting For - Parking/Camera Other. Specify Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

Entered 08/07/17 17:23:29 Desc Main Case 17-23561 Doc 1 Filed 08/07/17 Document Page 25 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 CREDIT ONE BANK \$300.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 60500 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 91716 City of Industry California City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collecting For - Unsecured debt Is the claim subject to offset? **✓** No Yes ILL COMM CU \$6,867.00 9143 Last 4 digits of account number _ Nonpriority Creditor's Name 2/2012 **508 W STATE POB 349** When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **SYCAMORE** Illinois 60178 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 60 Automobile-2008 Pontiac G6-Other. Specify Repossessed in 2013 Is the claim subject to offset? **✓** No Yes Illinois Tollway 4.6 \$800.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2700 Ogden Ave n/a Number Street As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated 60515 Downers Grove Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 26 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 N ILLNOIS U \$2,175.00 Last 4 digits of account number R24A Nonpriority Creditor's Name NIU STUDENT LOANS When was the debt incurred? 7/2006 Number As of the date you file, the claim is: Check all that apply. Contingent DE KALB Illinois 60115 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.8 Navient \$15,718.00 Last 4 digits of account number 1189 Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.9 Navient \$9,607.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 9/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts Other. Specify

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 27 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Navient \$7,358.00 Last 4 digits of account number 1213 Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 2/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.11 Navient \$6,120.00 Last 4 digits of account number 2207 Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 6/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes Navient 4.12 \$5,767.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 8/2006 Number As of the date you file, the claim is: Check all that apply. Contingent **WILKES BARRE** 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 28 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Navient \$5,277.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 6/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.14 \$4,700.00 Last 4 digits of account number 1171 Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes Navient 4.15 \$4,477.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 1/2007 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 29 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$6,843.00 4.16 Northern Illinois University Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1425 W Lincoln Hwy Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Dekalb Illinois 60115 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collecting For - unsecured debt Is the claim subject to offset? **✓** No Yes PLS - 7000 N Clark \$700.00 4.17 Last 4 digits of account number _ Nonpriority Creditor's Name 7000 N Clark St When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60626 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Collecting For - Payday loan Is the claim subject to offset? **✓** No Yes 4.18 Santander Consumer USA \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 14101 MYFORD RD FL 2 n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated TUSTIN California 92780 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting for - 2013 Nissan Altima-Impounded and Is the claim subject to offset? Other. Specify repossessed in 2017 **✓** No

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 30 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** US DEPT OF ED/GLELSI 4.19 \$47,361.00 Last 4 digits of account number Nonpriority Creditor's Name 2401 INTERNATIONAL LN When was the debt incurred? 9/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON 53704 Wisconsin Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.20 US DEPT OF ED/GLELSI \$29,302.00 Last 4 digits of account number 0581 Nonpriority Creditor's Name 2401 INTÉRNATIONAL LN When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON Wisconsin 53704 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 31 of 73

Debtor 1 Darryl Stallings Case number (if known)

| FIRST Na | me Middle Name Last Name | | | |
|--------------------------|--|---------|----------------------|-------|
| Part 4: Add t | ne Amounts for Each Type of Unsecured Claim | | | |
| | nmounts of certain types of unsecured claims. This information i nounts for each type of unsecured claim. | s for s | tatistical reporting | purpo |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 | |
| | amount here. | 0 | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$137,862.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$20,286.00 | |
| | 6i Total Add lines 6f through 6i | 6i | \$158,148.00 | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 32 of 73

| Fill in this infor | mation to identify your c | ase: | | |
|---------------------------|---------------------------|-------------|------------------------------|--|
| Debtor 1 | Darryl | Stallings | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | (| |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease | | | | State what the contract or lease is for |
|--|-------------------------|----------|----------|--|
| 2.1 | Safe Harbor Rea Name | alty | | Residential Lease, Debtor is Lessee, Residential Lease |
| | 1040 E 47th St | #2N | | |
| | Number | Street | | |
| | Chicago | Illinois | 60653 | |
| | City | State | Zip Code | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 33 of 73

| | | | D01 | Juliletit Page | 33 UI 73 |
|----------|---------------|--|--|-------------------------------|--|
| Fill in | this infor | mation to identify your ca | ase: | | |
| Debte | or 1 | Darryl | | Stallings | |
| Debto | vr 0 | First Name | Middle Name | Last Name | |
| | e, if filing) | First Name | Middle Name | Last Name | |
| Unite | d States B | Sankruptcy Court for the: | Northern | District of Illinois | |
| Case | number | | | (State) | |
| (If knov | vn) | | | | Object White to a |
| | | | | | Check if this is an amended filing |
| Off | icial | Form 106H | | | |
| Sak | a dul | e H: Your Cod | lohtoro | | 40/45 |
| <u> </u> | leaui | e n. Your Cou | eptors | | 12/15 |
| | | r every question. ve any codebtors? (If yo | u are filing a joint case, do | not list either spouse as a d | odebtor.) |
| | | | lived in a community propico, Puerto Rico, Texas, Wa | - ' | Community property states and territories include Arizona, California, |
| [| | Go to line 3. | | | |
| | | | r spouse, or legal equival | ent live with you at the tin | ne? |
| | | No Yes In which community | v state or territory did you | live? | _ Fill in the name and current address of that person. |
| | ш | 103. III WIIICII COITIITIGIIII | y state of territory did you | | _ r iii iii the mame and current address of that person. |
| | | Name of your spouse, for | ormer spouse, or legal equiv | valent | _ |
| | | Number Street | | | |
| | | City | State | Zip Code | |
| 3. I | n Column | ı 1, list all of your codeb | otors. Do not include your | spouse as a codebtor if | your spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 34 of 73

| | | 200 | oarrione | i ago o | | | |
|---|--|--|-------------------------|-----------------|--------------------|--------------------------|--------------------------|
| Fill in this in | formation to identify | your case: | | | | | |
| Debtor 1 | Darryl | | Stalling | gs | | | |
| | First Name | Middle Name | Last N | lame | Che | eck if this is: | |
| Debtor 2 | First Name | Middle Name | Last N | lama | _ | An amended filing | |
| | | | | | | Δ supplement showing | post-petition chapter 13 |
| United States the: Case number | Bankruptcy Court for | Northern | _ District of III (S | inois State) | | expenses as of the follo | |
| (If known) | · . | | | | _ | MM / DD / YYYY | |
| Official | Form 106I | | | | | | |
| Schedu | ıle I: Your In | come | | | | | 12/15 |
| information spouse. If m number (if k | about your spouse. I | | d your spou | se is not filin | g with you, do | not include informat | tion about your |
| _ | ur employment | | Debtor 1 | l | | Debtor 2 | |
| informat | | Employment status | ✓ Emplo | oved | | Employed | |
| | ve more than one job, eparate page with | | | mployed | | Not Employed | |
| | on about additional | Occupation | | | | | |
| | art time, seasonal, or oyed work. | Employer's name | JC Licht, I | LLC | | | |
| | on may include student | Employer's address | 901 S. Rowling Rd | | | | |
| | naker, if it applies. | Numb | | reet | | Number Street | |
| | | | | | | | |
| | | | Addison | Illinois | 60101 | | |
| | | | City | State | Zip Code | City | State Zip Code |
| | | How long employed there? | | | | | - |
| Part 2: Gi | ve Details About N | Monthly Income | | | | | |
| spouse unle | ess you are separated. | the date you file this form e more than one employer, et to this form. | • | information fo | r all employers fo | · | |
| | | | | For | Debtor 1 | non-filing spouse | |
| | | ary, and commissions (befo , calculate what the monthly | | 2. | \$2,470.80 | | _ |
| 3. Estima | te and list monthly ove | rtime pay. | | 3 | + \$0.00 | <u> </u> | <u>—</u> _ |
| 4. Calcula | ate gross income. Add li | ine 2 + line 3. | | 4. | \$2,470.80 | | _ |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 35 of 73

| Depto | | allings | Case number | (if | |
|---------------|--|---------------------|---------------------------|-----------------------------------|-------------------------|
| | First Name Middle Name La | ast Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Cor | by line 4 here | → 4. | \$2,470.80 | | |
| - | t all payroll deductions: | | | | |
| | . Tax, Medicare, and Social Security deductions | 5a. | \$534.06 | | |
| | . Mandatory contributions for retirement plans | 5b. | \$0.00 | | |
| | Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| | . Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| | Insurance | 5e. | \$0.00 | | |
| 5f. | Domestic support obligations | 5f. | \$0.00 | | |
| | . Union dues | 5g. | \$0.00 | | |
| | . Other deductions. Specify: | 5h. + | \$0.00 + | | |
| | d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f | • | \$534.06 | | |
| 7. Cal | culate total monthly take-home pay. Subtract line 6 from line | 4. 7. | \$1,936.74 | | |
| 8. List | t all other income regularly received: | | | | |
| 8a. | Net income from rental property and from operating a business, profession, or farm | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. <u>.</u> | \$0.00 | | |
| 8b | . Interest and dividends | 8b. | \$0.00 | | |
| 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$0.00 | | |
| 8d | . Unemployment compensation | 8d. | \$0.00 | | |
| 8e. | Social Security | 8e. | \$0.00 | | |
| | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | 94 | *0.00 | | |
| 9.0 | Pension or retirement income | 8f. | \$0.00 \$0.00 | | |
| J | | 8g. 8h. + | \$0.00 + | | |
| | Other monthly income. Specify: | | | | |
| 9. Aut | d all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | on. 9. <u>-</u> | \$0.00 | | |
| | Iculate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spo | 10. | \$1,936.74 | = | \$1,936.74 |
| In c frie | ate all other regular contributions to the expenses that you clude contributions from an unmarried partner, members of your hands or relatives. not include any amounts already included in lines 2-10 or amour | iousehold, your d | ependents, your roomm | | |
| | • | its that are not av | aliable to pay expenses i | 11. | + \$0.00 |
| <u></u> | ecify: | | | | + |
| | dd the amount in the last column of line 10 to the amount in ite that amount on the Summary of Schedules and Statistical Sum | | | | \$1,936.74 |
| | | | | | Combined monthly income |
| 13. D | byou expect an increase or decrease within the year after your of the second of the se | ou file this form? | | | |
| Ľ | | | | | |
| L | Yes. Explain: | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 36 of 73

| | | Doct | iment Page 36 of 73 | | | |
|--|--|---|--|-------------------------------------|--------------------------|--------------|
| Fill in this infor | mation to identify your | case: | | | | |
| Debtor 1 | Darryl | | Stallings | | | |
| Dobtor 0 | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing | I | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | A supplement sho expenses as of the | | • |
| Case number (If known) | | | (Giaic) | MM / DD / YYYY | | |
| Official | Form 106J | | | | | |
| | e J: Your Exp | enses | | | | 12/15 |
| information. If (if known). Ans | = | attach another sheet to this | re filing together, both are equally form. On the top of any additional | | | ıumber |
| 1. Is this a joi | | , id | | | | |
| | o to line 2 | | | | | |
| | oes Debtor 2 live in a s | enarate household? | | | | |
| | | eparate nousenoid: | | | | |
| L F | No Yes. Debtor 2 must fi | ile Official Forms 106J-2, <i>Exper</i> | nses for Separate Household of Debto | r 2. | | |
| 2. Do you hav | e dependents? | lo | | | | |
| Do not list D Debtor 2. | ebtor 1 and Y | es. Fill out this information for ach dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depend with you? | dent live |
| | penses include | lo. | | | | |
| expenses o than | | _ | | | | |
| yourself and dependents | u your | es | | | | |
| Part 2: Esti | mate Your Ongoing | Monthly Expenses | | | | |
| | of a date after the bank | | you are using this form as a supplet plemental Schedule J, check the b | | | |
| | | cash government assistance it on Schedule I: Your Income | | | Yo | our expenses |
| | or home ownership export the ground or lot. 4. | kpenses for your residence. In | nclude first mortgage payments and | | 4. | \$900.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Property, homeowner's, or renter's insurance | | | | | 4b. | \$0.00 |

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 37 of 73

Debtor 1 Darryl Stallings Case number (if known)
First Name Middle Name Last Name

| | First Name | Middle Name Last Name | | |
|--|--------------------------------------|--|-----|---------------|
| Section Sect | | | | Your expenses |
| 6a. Electricity, heat, natural gas 6a. \$285.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$100.00 6d. Other. Specify: 6d. \$0.00 7. Food and housekeeping supplies 7. \$300.00 8. Childcare and children's education costs 8. \$0.00 9. Ciothing, laundry, and dry cleaning 9. \$27.00 10. Personal care products and services 11. \$0.00 11. Medical and dental expenses 11. \$0.00 11. Medical and dental expenses 11. \$0.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$70.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Install insurance 15. \$0.00 15b. Haulth insurance deducted from your pay or included in lines 4 or 20. \$0.00 15c. Vahicle Insurance 15. \$0.00 1 | 5. Additional mortgage payments | for your residence, such as home equity loans | 5. | \$0.00 |
| 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, call phone, Internet, satellite, and cable services 6c. \$160.00 6d. Other. Specify: 7. \$300.00 7. Food and housekeeping supplies 7. \$300.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$27.00 10. Personal care products and services 10. \$19.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$70.00 10. not include are payaments 14. \$0.00 14. Charitable contributions and religious donations 13. \$0.00 15. Insurance. 15. \$0.00 15b. Health insurance 15a \$0.00 15c. Vehicle insurance specify: 15a \$0.00 15c. Vehicle insurance specify: 15a \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 Specify: 16 \$0.00 17c. Cher. Specify: <td>6. Utilities:</td> <td></td> <td></td> <td></td> | 6. Utilities: | | | |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. \$160.00 6d. Other. Specify: 6d. \$160.00 6d. Other. Specify: 7. Food and housekeeping supplies 8. \$0.00 7. Food and housekeeping supplies 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$27.00 10. Personal care products and services 110. \$19.00 111. Medical and dental expenses 111. \$0.00 112. Transportation. Include gas, maintenance, bus or train fare. 0 Do not include care payments 112. \$70.00 113. Entertainment, clubs, recreation, newspapers, magazines, and books 114. Charitable contributions and religious donations 115. Insurance. 116. \$0.00 115. Leath insurance 117. Leath insurance 118. Life insurance 119. \$0.00 119. Leath insurance 119. \$0.00 119. Leath insurance 119. \$0.00 119. Charitable contributions and religious donations 119. \$0.00 119. Leath insurance 119. \$0.00 119. Leath insurance 119. \$0.00 119. Leath insurance 119. \$0.00 119. Charitable contributions and religious donations 119. Secoply: 110. Secoply: 110. Secoply: 110. Secoply: 110. Secoply: 111. Installment or lease payments: 111. Installment or lease payments: 112. Secoply: 113. Care payments for Vehicle 1 119. \$0.00 119. Cother. Specify: 110. Secoply: 111. Secoply: 111. Secoply: 112. Secoply: 113. Cother. Specify: 114. Secoply: 115. Cother. Specify: 116. Secoply: 117. Cother. Specify: 117. Secoply: 118. Vour payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106). 119. \$0.00 110. Other payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106). 119. \$0.00 120. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Montgages on other property 20b. Pade asstate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Poperty, homeowner's, or renter's insurance | 6a. Electricity, heat, natural gas | | 6a. | \$285.00 |
| 6d. Other Specify: | 6b. Water, sewer, garbage collection | on | 6b. | \$0.00 |
| 7. Food and housekeeping supplies 7. \$300.00 8. Childran's and childran's education costs 8. \$0.00 9. Citching, laundry, and dry cleaning 9. \$27.00 10. Personal care products and services 10. \$19.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$70.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a \$0.00 Do not include insurance ededucted from your pay or included in lines 4 or 20. 15a \$0.00 15b. Health insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance. Specify: 15a \$0.00 15c. Vehicle insurance. Specify | 6c. Telephone, cell phone, Interne | t, satellite, and cable services | 6c. | \$160.00 |
| 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$27.00 10. Personal care products and services 10. \$19.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Onto include taxes deducted from your pay or included in lines 4 or 20. 15c. Transportation in the decay of the | 6d. Other. Specify: | | 6d | \$0.00 |
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| 10. Personal care products and services 11. Medical and dental expenses 11. S10.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. S0.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Life insurance 15b. S0.00 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15c. Vehicle insurance. 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. 15c. Vehicl | 8. Childcare and children's educat | ion costs | 8. | \$0.00 |
| 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$70.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15c. \$0.00 15c. Vehicle insurance. Specify: 15d. \$0.00 15c. Vehicle insurance. Specify: 15d. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$pecify: 15d. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$pecify: 15d. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 17c. Installment or lease payments: 17a \$0.00 | 9. Clothing, laundry, and dry clean | ing | 9. | \$27.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$70.00 | 10. Personal care products and se | rvices | 10. | \$19.00 |
| Do not include car payments 13. 13. 13. 13. 13. 13. 14. | 11. Medical and dental expenses | | 11. | \$0.00 |
| 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 00 not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Life insurance 15b \$0.00 15b \$0.00 15c. Vehicle insurance 15c \$0.00 15c. Vehicle insurance. Specify: 15d \$0.00 15d. \$0.00 \$0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$0.00 16. \$0.00 | | intenance, bus or train fare. | 12. | \$70.00 |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$0.00 15d. Other insurance. Specify: 15d. \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18. Your payments you make to support others who do not live with you. Specify: 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. \$0.00 20d. Maintenance, repair, and upkeep expenses. | 13. Entertainment, clubs, recreation | on, newspapers, magazines, and books | 13. | \$0.00 |
| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$0.00 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: 15d \$0.00 15d. Other insurance. Specify: 16 \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 \$0.00 17. Installment or lease payments: 17a \$0.00 17b. Car payments for Vehicle 1 17a \$0.00 17c. Other. Specify: 17b \$0.00 17c. Other. Specify: 17c \$0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 14. Charitable contributions and re | eligious donations | 14. | \$0.00 |
| 15b | | d from your pay or included in lines 4 or 20. | | |
| 15c. Vehicle insurance | 15a. Life insurance | | 15a | \$0.00 |
| 15d. Other insurance. Specify: | 15b. Health insurance | | 15b | \$0.00 |
| Specify: | | | 15c | \$0.00 |
| Specify: | 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. | 16. Taxes. Do not include taxes dedu | ucted from your pay or included in lines 4 or 20. | | |
| 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. S0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. | Specify: | | 16 | \$0.00 |
| 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | 17. Installment or lease payments: | | | |
| 17c. Other. Specify: | 17a. Car payments for Vehicle 1 | | 17a | \$0.00 |
| 17d. Other. Specify: | 17b. Car payments for Vehicle 2 | | 17b | \$0.00 |
| 17d. Other. Specify: | 17c. Other. Specify: | | 17c | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20c. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | 17d | \$0.00 |
| 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | | \$0.00 |
| Specify: | | | 18. | |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | , , , | upport others who do not live with you. | 10 | \$0.00 |
| 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00 | | ot included in lines 4 or 5 of this form or on Schedule I: Your Income | 19. | |
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| 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | | |
| 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 20c. Property, homeowner's, or re | enter's insurance | | |
| | 20d. Maintenance, repair, and upl | ceep expenses. | | |
| | 20e. Homeowner's association or | condominium dues | 20e | \$0.00 |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 38 of 73

| Debtor 1 Darryl | | Stallings | Case number (if known) | | |
|----------------------------|-------------------------------------|------------------------------|------------------------|-----|------------|
| First Name | Middle Name | Last Name | | | |
| 21.Other. Specify: | | | | 21 | \$0.00 |
| | | | | | |
| 22. Calculate your monthl | ly expenses. | | | | \$1,761.00 |
| 22a. Add lines 4 through | n 21. | | | | \$0.00 |
| 22b. Copy line 22 (mont | thly expenses for Debtor 2), if any | from Official Form 106J-2 | | | \$1,761.00 |
| 22c. Add line 22a and 22 | 2b. The result is your monthly exp | enses. | | 22. | |
| 23. Calculate your monthly | y net income. | | | | |
| 23a. Copy line 12 (your | combined monthly income) from | Schedule I. | | 23a | \$1,936.74 |
| 23b. Copy your monthly | expenses from line 22 above. | | | 23b | \$1,761.00 |
| , | thly expenses from your monthly i | ncome. | | | \$175.74 |
| The result is your n | nonthly net income. | | | 23c | |
| For example, do you ex | ease or decrease in your expen | oan within the year or do yo | ou expect your | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 39 of 73

| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Darryl | | Stallings | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (2.5.5) | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | | |
|-----|---|---|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| | ✓ No | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and | | | | | |
| × | /s/ Darryl Stallings | × | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | |
| | Date 8/7/2017 | Date | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 40 of 73

| Fill in th | is infori | mation to identify your c | ase: | | | | | |
|------------------------|------------------------|---|--------------------------|--|----------------------|----------|----------|-----------------------------------|
| Debtor | 1 | Darryl First Name | Middle I | Stalling: Name Last Na | | | | |
| Debtor 2 (Spouse, i | | First Name | Middle I | Name Last Na | me | | | |
| United 9 | States B | ankruptcy Court for the: | Northern | District of Illin | nois | | | |
| Case nu (If known) | | | | (St | ate) | | | |
| Offic | cial | Form 107 | | | | _ | | Check if this is a amended filing |
| State | emei | nt of Financia | ıl Affairs f | or Individuals | Filing for | Bankru | ptcv | 04/10 |
| informa number | ation. If r (if kno | f more space is neede own). Answer every q | ed, attach a sepuestion. | arried people are filing arate sheet to this for and Where You Live | m. On the top of | | | |
| | | | | and where rou live | u Deloi e | | | |
| 1. W | | your current marital st | atus? | | | | | |
| | | ried married | | | | | | |
| 2. D | uring t | he last 3 years, have yo | ou lived anywher | e other than where you | live now? | | | |
| | No Yes | . List all of the places yo | ou lived in the las | t 3 years. Do not include | where you live no | W. | | |
| | Deb | tor 1: | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | Same as D | Debtor 1 | | Same as Debtor 1 |
| | | 5 W. Hood hber Street | | From | Number Street | | | From |
| | Chic City | cago Illinois State | 60660 Zip Code | | City | State | Zip Code | |
| | | | | | Same as D | Debtor 1 | | Same as Debtor 1 |
| | Nun | nber Street | | From | Number Street | | | From |
| | City | State | Zip Code | | City | State | Zip Code | |
| | d territor | <i>ies</i> include Arizona, Califo | omia, Idaho, Louis | oouse or legal equivaler siana, Nevada, New Mexic Codebtors (Official Forr | o, Puerto Rico, Texa | | | mmunity property states |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 41 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$12000.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$35373.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$28000.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Gross income from Sources of income Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est. YTD LINK \$720.00 From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 42 of 73

Stallings Debtor 1 Darryl __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 43 of 73

| or ' | 1 Darryl | | | St | allings | Case number | (if known) |
|-----------------|--|--------------------------------------|--|--|--|--|---|
| | First Name | | Middle Name | La | st Name | | |
| ns or age | iders include your porations of which | relatives; and you are a for a busir | any general partners an officer, director, ness you operate as | s; relatives of any person in control | general partners; par or owner of 20% o | tnerships of which y r more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to | an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| insi | der? ude payments on No | debts gua | aranteed or cosigne | ed by an insider. | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | | | | | | |
| | | State | Zip Code | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 44 of 73

Debtor 1 Darryl Stallings Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property 2013 Nissan Altima \$0 Santander Consumer USA Creditor's Name Explain what happened PO Box 961245 Number Street Property was repossessed. Property was foreclosed. Fort Worth 76161 Texas Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City Zip Code State Property was attached, seized, or levied.

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 45 of 73

| Debt | tor 1 Darryl | Stallings | Case number (if known) | |
|------|---|--------------------------|---|-----------------------|
| | First Name Middle Na | me Last Name | | |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment be | | pank or financial institution, set off any am | ounts from your |
| | ✓ No Yes. Fill in the details. | | | |
| | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | <u> </u> |
| | Number Street | | | |
| | - | Last 4 digits of account | number: XXXX- | |
| | City State Zip C | ode | | |
| 12. | Within 1 year before you filed for bankrupt appointed receiver, a custodian, or another | | possession of an assignee for the benefit o | f creditors, a court- |
| | ✓ No ☐ Yes | | | |
| Part | t 5: List Certain Gifts and Contribution | ns | | |
| 13. | | | otal value of more than \$600 per person? | |
| | ✓ No ✓ Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than a per person | \$600 Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | Number Street | | | |
| | City State Zip C | ode | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | |
| | Number Street | | | |
| | City State Zip C Person's relationship to you | ode | | |
| | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 46 of 73

| | Darryl | Stallings | Case number (if know | n) | |
|----------|---|--|-----------------------------|---|------------------------|
| | First Name Middle Name | Last Name | | • - | |
| | | | | | |
| . Wit | hin 2 years before you filed for bankruptcy, | did you give any gifts or contribut | ions with a total value o | of more than \$600 | to any charity? |
| | No | | | | |
| ✓ | | | | | |
| | Yes. Fill in the details for each gift or contrib | oution. | | | |
| | Gifts or contributions to charities | Describe what you contrib | uted | Date you | Value |
| | that total more than \$600 | 2000 | | contributed | |
| | ***** | | | 1 | |
| | | | | | |
| | Charity's Name | | | | |
| | | | | | |
| | | | | | |
| | Number Street | | | | |
| | | | | | |
| | City State Zip Code | | | | |
| | , | | | | |
| rt 6: | List Certain Losses | | | | |
| gar ✓ | No Yes. Fill in the details. | Describe one insurance o | numero for the loca | Date of vour | Value of monorhy |
| | Describe the property you lost and how the loss occurred | Describe any insurance of Include the amount that ins pending insurance claims of A/B: Property. | urance has paid. List | Date of your loss | Value of property lost |
| | | A.B. Floperty. | | | |
| | | | | | |
| | List Certain Payments or Transfers | | | | |
| | ude any attorneys, bankruptcy petition preparers | ruptcy petition? s, or credit counseling agencies for s | ervices required in your ba | ankruptcy. | |
| | ude any attorneys, bankruptcy petition preparers No | | ervices required in your b | ankruptcy. | |
| | | | ervices required in your ba | ankruptcy. | |
| □ | No | s, or credit counseling agencies for s | | | Amount of |
| ✓ | No | s, or credit counseling agencies for s Description and value of a | | Date payment | Amount of |
| □ | No | s, or credit counseling agencies for s | | Date payment or transfer | Amount of payment |
| □ | No Yes. Fill in the details. | Description and value of a transferred | | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm | s, or credit counseling agencies for s Description and value of a | | Date payment or transfer | |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | Description and value of a transferred | | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | Description and value of a transferred | | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | Description and value of a transferred | | Date payment or transfer was made | payment |
| □ | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | Description and value of a transferred | | Date payment or transfer was made | payment |
| | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code | Description and value of a transferred | | Date payment or transfer was made | payment |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 47 of 73

| Debto | | | | | se n | umber (if known) | | | |
|--------|-------------------|---|--------------------------------|---|-------|--------------------------------------|--|--------|------------------------------|
| | | First Name Middle Name | L | ast Name | | | | | |
| ŀ | nelp | hin 1 year before you filed for bankruptcy, p you deal with your creditors or to make p not include any payment or transfer that you li | ayments to yo | our creditors? | alf p | ay or transfer | any property to a | anyone | who promised to |
| [| ☑ | No Yes. Fill in the details. | | | | | | | |
| - | | | | ription and value of any prop ferred | erty | | Date payment or transfer was made | Amou | unt of payment |
| | | Person Who Was Paid | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Zip Code | | | | | | | |
| t I | he ncli | hin 2 years before you filed for bankruptcy, ordinary course of your business or financ ude both outright transfers and transfers made transfers that you have already listed on this s | al affairs? as security (su | | | | | | |
| [| <u> </u> | No | | | | | | | |
| [| | Yes. Fill in the details. | | | | | | | |
| | | | | ription and value of property ferred | | Describe any payments re in exchange | r property or ceived or debts p | aid | Date transfer was made |
| | | Person Who Received Transfer | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Zip Code Person's relationship to you | | | | | | | |
| | | Person Who Received Transfer | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Zip Code Person's relationship to you | | | | | | | |
| k | en | hin 10 years before you filed for bankruptc eficiary? ese are often called asset-protection devices.) | , did you tran | sfer any property to a self-se | ∍ttle | ed trust or sim | ilar device of whi | ch you | are a |
| [| <u> </u> | No Yes. Fill in the details. | | | | | | | |
| ı | | 165. Till III ule actalis. | Des | cription and value of the pro | pert | y transferred | | | Date transfer was made |
| | | Name of trust | | | | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Page 48 of 73 Document Stallings Debtor 1 Darryl Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it?

City

Name of Storage Facility

State

Zip Code

Number Street

Name

Number City

Street

State

Zip Code

No

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 49 of 73

Stallings Debtor 1 Darryl Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 50 of 73

| Debt | tor 1 | | M. dalla | Niere | Stallings | Case i | number <i>(if k</i> | nown) | | |
|------|-------|--|--|--|--|--|---------------------------|----------------------------|---------------|-------------------------------|
| | | First Name | Middle | Name | Last Name | | | | | |
| 26. | _ | | in any judicial or | administrative | proceeding under | any environmenta | ıl law? Inc | lude settleme | nts and orde | rs. |
| | | No Yes. Fill in the deta | ails. | | | | | | | |
| | | | | Cour | t or agency | | Nature of | the case | | Status of the case |
| | | Case title | | Court | t Name | | | | | Pending |
| | | Case number | | Numl | ber Street | | | | | On appeal Concluded |
| | | | | City | State | Zip Code | | | | Considued |
| Part | 11: | Give Details Ab | out Your Busine | ess or Conne | ctions to Any Bu | siness | | | | |
| 27. | With | A sole propried A member of A partner in a An officer, dir An owner of a | etor or self-employ a limited liability co partnership ector, or managing at least 5% of the v | red in a trade, pompany (LLC) or great executive of a roting or equity to Part 12. | own a business or laborofession, or other or limited liability partial accorporation assecurities of a corporation also below for each business or laboration as a corporation a | activity, either full rtnership (LLP) poration | _ | | any business? | |
| | | | | | Describe the natu | | 3 | Employer Ide include Socia | | |
| | | Business Name | | | | | | EIN: | | |
| | | Number Street | | | Name of accounta | nnt or bookkeeper | Dates business existed er | | | |
| | | City | State Zip | o Code | | | | From | To | |
| | | | | | Describe the natu | re of the business | 3 | Employer Ide include Socia | | |
| | | Business Name | | | | | | EIN: | | |
| | | Number Street | | | Name of accounta | ınt or bookkeeper | | Dates busine | ss existed | |
| | | City | State Zip | OCode | | | | From | То | |
| | | | | | Describe the natu | re of the business | • | Employer Ide include Socia | | imber Do not mber or ITIN. |
| | | Business Name | | | | | | EIN: | | |
| | | Number Street | | | Name of accounta | ınt or bookkeeper | | Dates busine | ss existed | |
| | | City | State Zip | Code | | | | From | To | <u></u> |
| | | | | | | | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 51 of 73

| Deb | tor 1 Darryl | | Stallings | Case number (if known) |
|--------|------------------------------------|--------------------------|-------------------------------|--|
| | First Name | Middle Name | Last Name | |
| 28. | creditors, or other parties. | d for bankruptcy, did yo | ou give a financial statemer | nt to anyone about your business? Include all financial institutions, |
| | ✓ No Yes. Fill in the details bek | DW. | | |
| | _ | | Date issued | |
| | | | | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | _ | |
| | City State | Zip Code | _ | |
| Part | t 12: Sign Below | | | |
| | | n fines up to \$250,000, | , . | ty, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of De | | | Signature of Debtor 2 |
| | Date 8/7/201 | 7 | | Date |
| I | | | Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
|]] | ✓ No Yes | | | |
| ı | Did you pay or agree to pay so | meone who is not an at | torney to help you fill out b | ankruptcy forms? |
| ſ | ✓ No | | | |
| į | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 52 of 73

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Dis | strict of Illinois | | | | |
|---|---|-----------------------------|----------------------------------|--|--|--|--|
| n re | Darryl Stallings | | Case No. | | | | |
| | Debtor | | | (If known) | | | |
| | | | Chapter | Chapter 13 | | | |
| | DISCLOSURE OF | COMPENSATI | ON OF ATTORNE | EY FOR DEBTOR | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of t | he petition in bankruptcy, or ac | | | | |
| | For legal services, I have agreed to ac | cept | | \$4,000.00 | | | |
| | Prior to the filing of this statement I h | nave received | | \$0.00 | | | |
| | Balance Due | | | \$4,000.00 | | | |
| 2. | . The source of the compensation paid | I to me was: | | | | | |
| | Debtor | Other (spec | ify) | | | | |
| 3. | . The source of the compensation paid | I to me is: | | | | | |
| | ✓ Debtor | Other (spec | ify) | | | | |
| 4. | 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | |
| I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. | | | | | | | |
| 5. | . In return for the above-disclosed fee, a. Analysis of the debtor's finan bankruptcy; | - | · · | ne bankruptcy case, including: ermining whether to file a petition in | | | |
| | b. Preparation and filing of any | oetition, schedules, state | ments of affairs and plan which | n may be required; | | | |
| | c. Representation of the debtor | at the meeting of creditor | rs and confirmation hearing, an | nd any adjourned hearings thereof; | | | |
| | d. Representation of the debtor | in adversary proceedings | and other contested bankrupt | cy matters; | | | |
| 6 | . By agreement with the debtor(s), the | above-disclosed fee does | s not include the following serv | vices: | | | |
| | | | | | | | |
| | | CERTII | FICATION | | | | |
| | certify that the foregoing is a complet or(s) in this bankruptcy proceedings. | e statement of any agree | ment or arrangement for payme | ent to me for representation of the | | | |
| | 8/7/2017 | | /s/ Chris Pryor | | | | |
| | Date | | Signature of Attorney | , | | | |
| | | | Semrad Law Firm | | | | |
| | | | Name of law firm | | | | |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 53 of 73

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 54 of 73

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 55 of 73

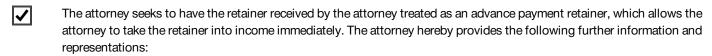
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$61.76 for expenses, leaving a balance due of \$4,371.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 8/7/2017 | |
|-----------|--------------|------------------------|
| Signed: | | |
| /s/ Darry | yl Stallings | |
| | | /s/ Chris Pryor |
| Debtor(s | s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1 717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 62 of 73

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Stallings, Darryl | Case No | |
|---------|---|---|--------------------------------------|
| | Debtor(s) | | |
| | | Chapter | Chapter13 |
| | VERIFICAT | ON OF CREDITOR MAT | ΓRIX |
| knowled | The above named Debtors hereby verify that dge. | the attached list of creditors is to | rue and correct to the best of their |
| Date: | 8/7/2017 | /s/ Stallings, Dar Stallings, Darryl | ryl |
| | | Signature of Del | btor |

US DEPT OF ED/GLELSI 2401 Internal Lane Attn: Chhengre Lim Madison, WI, 53704

Navient PO BOX 9655 WILKES BARRE, PA, 18773

ILL COMM CU 508 W STATE POB 349 SYCAMORE, IL, 60178

N ILLNOIS U NIU STUDENT LOANS DE KALB, IL, 60115

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

City of Chicago - Dep't of Revenue PO Box 88292 Chicago, IL, 60608

American InfoSource LP (agent for TMobile) PO Box 248848 Attn: Ashley Boswell Oklahoma City, OK, 73124

Northern Illinois University 1425 W Lincoln Hwy Dekalb, IL, 60115

Illinois Tollway PO Box 5544 Chicago, IL, 60680

CREDIT ONE BANK PO Box 98875 Las Vegas, NV, 89193

PLS - 7000 N Clark 1006b E 162nd St South Holland, IL, 60473 Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 64 of 73

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

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Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 65 of 73

6. Advise the debtor of the need to maintain appropriate insurance.

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- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 66 of 73

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$61.76 for expenses, leaving a balance due of \$4,371.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 8/7/2017 | |
|---------------------|------------------------|
| Signed: | |
| /s/ Daryl Stallings | |
| | /s/ Chris Pryor |
| Debtor(s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 69 of 73

| Debtor 1 Darryl First Name | | lings Case r | number (it known) | |
|--|--|--|---|---|
| and continuous and co | estions for Reporting Purposes | Name | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily confine the first serious and individual primarily No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily but money for a business or investigation of the first serious first seri | imarily for a personal, fami siness debts? Business of estment or through the ope | ly, or household purpose." lebts are debts that you incueration of the business or in | arred to obtain |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No. | | y exempt property is excluded e to unsecured creditors? | I and administrative |
| 18. How many creditors do you estimate that you owe? | 7 1-49 50-99 100-199 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-5 50,001-1 More that | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 m \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50 | million | 0,001-\$1 billion 00,001-\$10 billion 000,001-\$50 billion n \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | ☐ \$0-\$50,000 ☐ \$50,001-\$100,000 ☑ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 mi \$10,000,001-\$50 n \$50,000,001-\$100 \$100,000,001-\$50 | million | 0,001-\$1 billion 00,001-\$10 billion 000,001-\$50 billion n \$50 billion |
| | I have examined this petition, and I correct. If I have chosen to file under Chapt of title 11, United States Code. I ur under Chapter 7. If no attorney represents me and I cout this document, I have obtained I request relief in accordance with t I understand making a false statem connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 151 /s/ Darryl Stallings Signature of Debtor 1 Executed on 8/7/2017 MM / DD / YM | ter 7, I am aware that I may nderstand the relief availabed on the pay or agree to pay and read the notice requires the chapter of title 11, Unitient, concealing property, or can result in fines up to \$19, and 3571. | proceed, if eligible, under C le under each chapter, and I someone who is not an atto ed by 11 U.S.C. § 342(b). ed States Code, specified in or obtaining money or prope | Chapter 7, 11,12, or 13 choose to proceed orney to help me fill in this petition. Berty by fraud in or up to 20 years, or |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 70 of 73

| Fill in this infor | mation to identify your c | ase: | | | |
|---------------------------------|--|--|--|--|--|
| Debtor 1 | Darryl | | Stallings | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| | | | (State) | *************************************** | |
| Case number (If known) | *************************************** | | ************************************** | AMPROVIOUS ASSESSMENT OF THE PROPERTY OF THE P | |
| Official | Form 106De | eC. | | *************************************** | Check if this is an amended filing |
| | | | | | |
| Declarat | ion About an | Individual Debt | or's Schedules | | 12/15 |
| If two married | people are filing togeth | er, both are equally respon | sible for supplying correc | t information. | |
| money or propuls.C. §§ 152, | erty by fraud in connect 1341, 1519, and 3571. | ile bankruptcy schedules c ion with a bankruptcy case | or amended schedules. Mae e can result in fines up to s | aking a false statement, concealing prop \$250,000, or imprisonment for up to 20 y | erty, or obtaining years, or both. 18 |
| Carline Sign | Below | | CANADA MARIA CONTRACTOR CONTRACTO | | |
| Did you p | ay or agree to pay some | one who is NOT an attorne | y to help you fill out bank | ruptcy forms? | |
| IJ No | | | | | |
| Yes. I | Name of person | | Attach Bankruptcy P Signature (Official Fo | Petition Preparer's Notice, Declaration, and orm 119). | |
| | | | | | |
| Under per that they | nalty of perjury, I declar are true and correct | e that I have read the summ | mary and schedules filed v | with this declaration and | ************************************** |
| 🗶 /s/ Darry | l Stallings | | × | | |
| Signature o | Debtor 1 | | Signature | of Debtor 2 | |

Date

MM/DD/YYYY

Date 8/7/2017

MM/DD/YYYY

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 71 of 73

| Debtor 1 | 1 Darryl First Name | Middle Name | Stallings Last Name | Case number (if known) |
|-----------|---|--|---------------------------------------|---|
| 28. Wi | | ı filed for bankruptcy, did | | nent to anyone about your business? Include all financial institutions, |
| | No Yes. Fill in the details | below. | | |
| , | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | · · · · · · · · · · · · · · · · · · · | |
| | City S | State Zip Code | MAN- | |
| Pari 12 | Sign Below | | | |
| irue | and correct. I understankruptcy case can resi | and that making a false st ult in fines up to \$250,000 yi Stallings | atement, concealing prop | ments, and I declare under penalty of perjury that the answers are terty, or obtaining money or property by fraud in connection with 0 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature c | of Debtor 1 | J | Signature of Debtor 2 |
| | Date 8/7/ | 2017 | | Date |
| ********* | vou attach additional p No | ages to Your Statement o | f Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| Benerod | Yes | | | |
| Did y | ou pay or agree to pay | someone who is not an a | ttorney to help you fill ou | bankruptcy forms? |
| | No | | | • |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 72 of 73

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| in te: | Stallings, Darryl Debtor(s) | Case No | |
|----------------|--|---|-------------------------------------|
| | • | Chapter. | Chapter13 |
| | VERII | FICATION OF CREDITOR MAT | RIX |
| TI nowledge | ne above named Debtors hereby ve e. | erify that the attached list of creditors is tr | ue and correct to the best of their |
| rate: | 8 <i>/7/</i> 2017 | /s/ Stallings, Dan Stallings, Darryl | vi PAD |
| | | Stannings, Darryl Signature of Deb | otor y 🔾 |

Uf

Case 17-23561 Doc 1 Filed 08/07/17 Entered 08/07/17 17:23:29 Desc Main Document Page 73 of 73

| Debt | or 1 Darryl First Name | Middle Name | Stallings Last Name | Case number (if known) | |
|------|---|--|--|--|---------------------------|
| 16. | Calculate the median famil | v income that applies to vo | | | |
| | 16a. Fill in the state in which | | Illinois | | |
| | 16b. Fill in the number of peo | pple in your household. | 1 | | |
| | 16c. Fill in the median family | income for your state and size | e of | | \$50,765.00 |
| | household using the link specified i | n the senarate instructions for | To find a | list of applicable median income amounts, go online also be available at the bankruptcy clerk's office. | |
| 17. | How do the lines compare? | | uno tomic. Tina nacintay | aso be available at the banduptcy clerk's unice. | |
| | 17a. Line 15b is less tha under 11 U.S.C. § | n or equal to line 16c. On the <i>1325(b)(3).</i> Go to Part 3. Do | top of page 1 of this fo NOT fill out Calculation | rm, check box 1, Disposable income is not determine of Disposable Income (Official Form 122C-2). | ed |
| | U.S.C. § 1325(b)(3, | an line 16c, On the top of pa D. Go to Part 3 and fill out C rrent monthly income from lin | alculation of Disposat | box 2, Disposable income is determined under 11 if the lncome (Official Form 122C-2). On line 39 of the | at |
| Part | GE Calculate Your Com | mitment Period Under 1 | 1 U.S.C. §1325(b)(4 |) | |
| 18. | Copy your total average mo | | | | \$1,690.97 |
| 19. | Deduct the marital adjustment period under 11 | nent if it applies. If you are n U.S.C. § 1325(b)(4) allows y | narried, your spouse is no ou to deduct part of you | ot filing with you, and you contend that calculating tar spouse's income, copy the amount from line 13. | he |
| | 19a. If the marital adjustment | does not apply, fill in 0 on lin | e 19a. | en e | -\$0.00 |
| | 19b. Subtract line 19a from | line 18. | | | \$1,690.97 |
| 20. | Calculate your current mor | thly income for the year. Fo | ollow these steps: | | \ |
| | 20a. Copy line 19b. Multiply by 12 (the num | ber of months in a year). | | | \$1,690.97 x 12 |
| | 20b. The result is your curren | • . | for this part of the form | | \$20,291.64 |
| | | · | · | | |
| | 20c. Copy the median family | income for your state and size | e of household from line | 9 16c. | \$50,765.00 |
| 21. | How do the lines compare? | | | | |
| | Line 20b is less than line commitment period is 3 y | 20c. Unless otherwise ordere years. Go to Part 4. | d by the court, on the to | op of page 1 of this form, check box 3, The | |
| | Line 20b is more than or 4, The commitment period | equal to line 20c. Unless other of is 5 years. Go to Part 4. | erwise ordered by the co | urt, on the top of page 1 of this form, check box | |
| Part | Sign Below | | | | |
| | By signing here, I declare | under penalty of perjury that | the information on this s | statement and in any attachments is true and correct. | |
| | | 0 0/1 | **** | | |
| | /s/ Darryl Stalling | the state of the s | | | |
| | Signature of Debtor 1 | , p. C. | Sig | nature of Debtor 2 | |
| | Date 8/7/2017 MM/DD/YYYY | | Da | te MM/DD/YYYY | |
| | | OT fill out or file Form 122C-2 | | | |
| | If you checked 17b, fill ou above. | it Form 122C-2 and file it with | this form. On line 39 o | of that form, copy your current monthly income from | line 14 |